

Mental Health Education Programs at Korean High Schools: The Investigation of Student Satisfaction with the Current School-based Programs and Means to Improve

Jiho Chang

Branksome Hall Asia, Jeju, South Korea, jihochang05@gmail.com

ABSTRACT: Instances of debilitating stress, depression and suicidal ideation have been broadly documented in academic settings in South Korea. In response, a number of mental health programs have been introduced by schools to help students manage the pressures of academic life and combat hidden narratives of anxiety and depression. Via a week-long survey, this study investigates student responses to various mental health education programs at high schools in South Korea. The voices of the students shed light on their educational needs in terms of positive mental health outcomes, the systematic factors influencing their discontent, and the general importance of creating more realistic and implementable solutions to common mental health concerns. The data from the surveys were then combined with a case study analysis of mental health initiatives across different types of schools in South Korea and in the United States so as to gain insights from a complex, cross-cultural perspective. By acknowledging the points of view of the students as well as articles, academic papers and psychological reports, the research is better able to bridge the gap between the current idealistic model of mental health education and highly-customized best practices going forward. The findings are also impactful in terms of policy making and the introduction of student-centric, contextually sound, and sensitive formats and curriculums in the future.

KEYWORDS: Psychological counseling, School-based mental health education, Korean academic settings, Teen's mental health, trust issues

Introduction

Adolescence is a period when people start to experience psychological maturation; amidst the change, people tend to be affected by the environment they inhabit and their impulse during this time, leading them to be more vulnerable. Although the percentage of teenagers feeling distressed or depressed has shown a decrease by 9.3%p in 2018 since 2008's 46.5%, suicidal death has been the greatest driving factor of teenagers' mortality for over a decade in Korea. Professor Kim from Kosin University of Korea has demonstrated with her research result that the majority of adolescents are stressed; 77.5% of male and 89.8% of female students have responded positively to the question asking if they felt stressed in their daily lives (Kim 2020, 479). As this result shows, stress is a typical human reaction for youth. However, this frequent and familiar reaction can be damaging to students if they attempt to relieve it with unhealthy and ineffective means. For example, a survey result constructed by Korean Health Promotion Foundation has demonstrated that 66% of adolescents hold back their stress, 13% swear, and 6% yell or throw things to get rid of stress. Reporter Kang has indicated that such emotional approaches and avoidance cannot be helpful in overcoming negative emotions, therefore proving the importance of medically effective methods for mitigating inner stress (Kang 2019). Stress should be resolved before it converts into long-term stress because extremely consistent stress will not only be emotionally damaging, but also raising the risk of heart attack, stroke, and/or hypertension (APA 2018).

As previously stated, long-term stress may leave psychologically harmful effects on teenagers. Hence, it is necessary for them to be exposed to a supporting environment, which can provide effective intervention services. Numerous schools implement mental health services since most adolescents spend their time at school. They employ therapists or counselors who can support students suffering from school life, and the school-based social

workers sometimes hold programs that educate the significance of looking over one's own mental health and ways to do so. Nonetheless, several problems may occur regarding students' actual satisfaction with those programs, especially relating to their agendas: lack of unity within the curriculum, unclear directivity or forced sessions with unengaging activities may be the reasons for students' dissatisfaction because they can be emotionally satisfied when they are allowed to participate in activities with their own initiatives (Lim and Yoo 2017, 15). In addition, the agendas are constructed by faculties from school, therefore lacking the ability to reflect on students' psychological demands, which generally refer to greater power, fun, freedom, and love and belonging (Erden and Aliyev 2022, 5).

This paper tends to examine the effectiveness of current Korean high school-based mental health facilities and to furthermore suggest methods to improve the present situation.

Background

The History of Mental Health Programs

The origin of American schools' mental health system differs from that of Korean schools' mental health system. This section includes the history of US school-based mental health programs because the first Korean school-based mental health program was launched after American Education delegations were involved in altering the Korean education system.

Since 1907, Detroit Public Schools has initiated the original 'school counseling' by including life guidance in its curriculum. This *vocational and moral guidance*, specifically, was constructed in order to help students discover their internal identities, so they could grow up as moral and socially responsible members of the community (Baker, 2000). The counseling system within schools converted into the social counseling system after high school students' mental health became one of the chief affairs as Mental Hygiene Movement emerged. According to Lee, Oh, and Seo, the reregulation of school counselors' duties happened around the 1920s-1930s. The time when Guidance Reform Movement for better-qualified school counseling programs occurred was in the 1970s, and its success by the 1980s resulted in more specified templates for comprehensive school counseling programs and more varied versions of programs that could suit a greater number of schools from different regions (Lee, Oh, and Seo 2007, 543). Referring to Transforming School Counseling Movement, it can be inferred that American school-based mental health aids primarily focus on supporting teenaged students, transcending the emotional aspect; advocates of the movement assert that school counselors should be capable of assisting students as instructors, monitors, educational professionals of problem-solving, etc, especially to prevent academic failure of students from ethnic minority groups or low-income families.

On the other hand, Korean school-based mental health programs first started in the 1950s, when American Education delegations visited South Korea after the Korean Civil War to educationally succor the nation. Central Educational Research Center was where school counseling and theories of guidance were studied by Korean Association for Education. As a result, the first *correctional teachers* were hired by middle schools in Seoul in 1958-1961, and high school counselors were employed in 1963, nationwide. Subsequently, in 1964, a qualification system for training counselors was legally activated. The initial roles of school counselors were advisory counseling, managing students' private information, and providing any news or information to the students. Since the correctional teachers system originally focused on life guidance for students, it was in 1999 that the job title was converted to *counselors* from correctional teachers. This change was based on Article 21 of Elementary and Secondary Education Act (Lee, Oh, and Seo 2007, 539).

Comparing school-based mental programs from the US and Korea, it can be concluded that the American counseling system sought for simultaneous development in schools' academic programs, thus it was fundamentally based on an academic foundation. In contrast,

the Korean school-based mental health programs originated from the government's attempt to legalize the role of school counselors, inspired by American Education delegations. Korean school counseling seemingly progressed slower as it had weaker theoretical support, impractical policies, etc. These systematic errors must be resolved by institutional enhancement and provision of more specific rules for the counseling staff to be acknowledged, according to "Comparison Study of Korean and American School Counseling for Developing a Korean School Counseling Model" (Lee, Oh, and Seo 2007, 539).

Current system of mental health programs

The Adolescent Mental Health and Problem Behavior Questionnaire-II (AMPQ-II) has been held annually in Korean middle and high schools, in order to numerically measure students' mental health status at middle and high school levels since 2012. AMPQ-II tends to examine the severity of different factors that are considered to be influencing students' mental health, such as mood changes, suicidal ideation, anxiety, sleep, impulsivity, etc (Park, Lee, Jung, and Hong, 2019, 2). The significance of schools providing such mental health care service can be found from its benefits of preventing school failure and comorbid substance abuse (Stephan, Weist, Kataoka, Adelsheim, and Mills 2007, 1333).

Following the current circumstances of Korean schools, a great proportion of international schools, especially those located in western countries, were reported that their governments and educational administrations were supporting both financially and politically to strengthen the youth mental health care system held by schools (Wei and Kutcher 2012, 12-13). According to the same research paper's table, the adopted intervention domains are Promotion/Pro-social, Stigma, Depression, Anxiety, Suicide, and Eating disorders (Wei and Kutcher 2012, 16-21).

In the US, a vast array of models for school counseling were structured, which were often independently advised from certain states. The proliferation of state-independent school counseling templates later contributed to the country scale of school counseling policies, which was started in 1997 by the American School Counselor Association (ASCA). This long-term project ended in 2003, encompassing the prior school counseling system among different states of the US. The system is consistently developing since then, and recently, National Educational Trust has triggered Transforming School Counseling Movement (Lee, Oh, and Seo 2007, 539).

Problems of current mental health programs

As it is stated above, teenagers can be best satisfied when they are amidst an environment that allows them to self-direct their education. To probe the educational environment Korean students are usually exposed to, a study done by Chin, Kang, and Yi (2018, 120) has proven that 100% of the school samples (115 in total) execute student emotional • behavioral characteristics tests, 98.3% are running successive programs, and 43.5% are inviting professional lecturers from external institutions to educate students. What students consider problematic are not the absence or lack of mental health programs and examinations provided by schools, but the current mental health programs that are unlikely to fulfill the demands due to their forcibleness, lack of unity and activities, and disregarded relationship (personal interaction) between students and counselors.

A pre-interview was conducted at the beginning of July in order to collect Korean high school students' feedback for school-based mental health related facilities. According to the results of the pre-interview that was conducted from July 2nd to July 4th of 2022, out of the 10 interviewees, 8 have shown dissatisfaction to the school environment that can expose their visits to social counselors, 4 have shown dissatisfaction to the lack of confidentiality (disclosure of their privacy), and 3 have shown dissatisfaction to the circumstances that they feel emotional barriers to their counselors. This pre-interview was followed up by a survey that was held since July 8th, 2022, and served as a secondary means of an audit.

Results and Discussions

In order to investigate the contents of the programs, students' satisfaction level, and the efficiency of the programs, a survey targeting Korean high school students and graduates was held from July 8th, 2022, until July 15th, 2022, via a social media platform.

Which category does your past or current high school belong to?

1. 귀하가 소속된/소속되었던 교육기관은 다음 중 어느 분류에 속합니까?

응답 59개

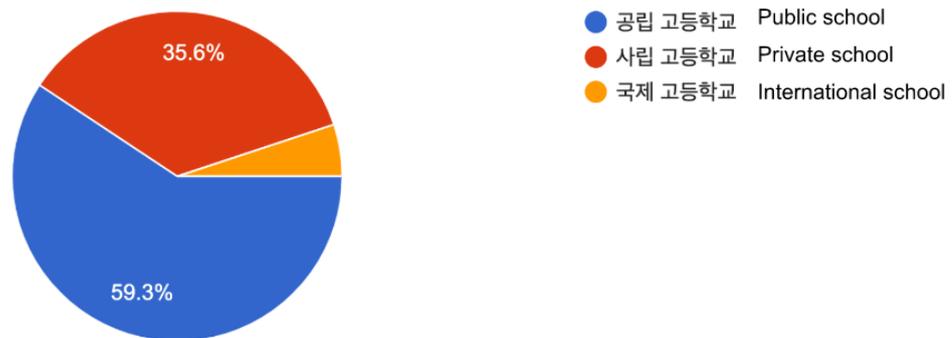


Figure 1. Summary Chart of the Answers for Question no. 1

Out of 59 respondents, 59.3% were from public schools, 35.6% were from private schools, and 5.1% were from international schools. Three categories of schools were chosen referring to the distinct educational system each adopted. By doing so, the data could be collected from vast array of samples from different types of schools.

Does your school provide any mental health related programs or systems to support students?

2. 귀하의 소속 교육기관엔 학생들의 정신건강 지원을 위한 프로그램이나 시스템이 마련되어 있습니까?

응답 59개

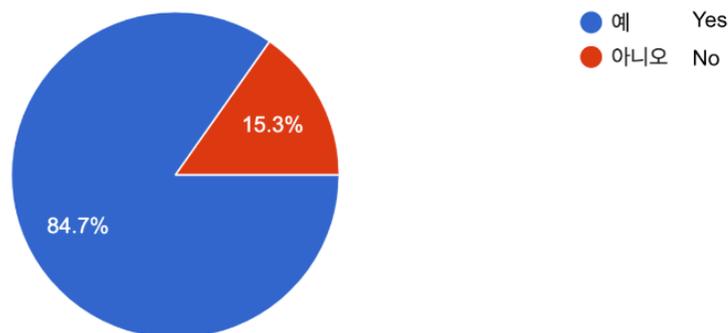


Figure 2. Summary Chart of the Answers for Question no. 2

Out of total, 84.7% replied that their schools provide at least one program to enrich students' mental health. The third question from the survey asked the exact type of school-based mental health education facilities: the majority of the mental health supports provided by schools were related to Wee Class¹ (64.4%), education for life protection (59.3%), and student emotional behavioral characteristics tests (47.5%). However, some of the respondents

¹ Wee Class is a public service provided by majority of Korean schools, which offers counseling and education sessions to students whenever needed (Wee Project Agencies).

commented that they want their schools to provide education for life protection to the question that was asking remedies.

If your school did run any school-based mental health education programs, would they be effective?

4. 귀하의 소속 교육기관에서 집단 교육 프로그램(정신건강 증진 교육, 생명 존중 및 자살 예방 교육 등)을 실시하였을 경우, 긍정적인 효과가 있다고 생각하십니까?

응답 59개

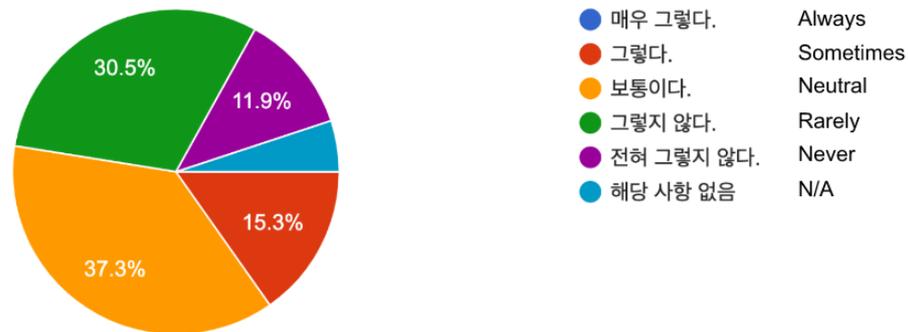


Figure 3. Summary Chart of the Answers for Question no. 4

While 37.3% has answered ‘Neutral’, and 42.4% has answered either ‘Rarely’ or ‘Never’, only 15.3% responded positively (‘Sometimes’) to the question if they consider the school-based mental health programs effective. As a result, it can be inferred that majority of the Korean high schools do provide service to psychologically support their students, and yet those students are showing low satisfaction level.

Some of the responses from the survey followed a similar logic to the rationale involuntary clients claimed regarding counseling: they do not admit the issue (rather external or internal), do not want to confront changes, and do not know how to change (Ritchie 1986, 516). Each of these reasons can be linked to separate phenomena: first, students do not recognize the significance of mental health problems (specifically relating to Korean college admissions, the study results also indicated that Korean high school students are amidst the environment in which they can hardly concentrate during the programs their schools enforce); second, they find it difficult to adapt to the school’s new programs as they are already “busy with other academic work” (33.9% of the survey respondents chose ‘unclear effectiveness of the lessons and hardly understood purpose of the program’ as the reason for their dissatisfaction); third, the programs are not properly educating them to understand the key concepts.

The current construction of the program can be problematic since one-way lecture lacks active interaction between counselors and students, thus resulting in low efficiency. One of the respondents replied to the question asking specifics about their dissatisfaction upon the current programs that “a lecture format of these programs hardly evoked students’ attention and interest”. Furthermore, a meta-analysis of studies published in the Proceedings of the National Academy of Sciences of the United States of America (PNAS) has proven that a lecture involving no physical engagement of the listeners is ineffective for educating them (Daub 2014). In other words, the driving demotivating factors for students attentively participating in school-based mental health education programs were found out to be the forcibleness of the sessions disregarding students’ academic schedules, mundane and nebulous contents of the curriculum, and unidirectional lectures involved in every session.

Recommendations

Cases from an international school in South Korea

Referring to the ratio of respondents' school of origin, it can be inferred that the responses from international school students are not generally included, since the number of international schools in Korea is much smaller than that of other public and private high schools. Hence, the following example tends to elaborate on cases of teenagers' reaction to mental health education programs adopted by a Korean international school.

The school, located on Jeju Island in South Korea, enforces its students to participate in mental-health-related sessions weekly during the periods when they are “seemingly distressed”. Three different sessions are held, each of them presenting eating disorders, self-talk, and anxiety and depression. The concepts educated via this program are more varied than those included in Korean public school-based mental health programs, yet students from this international school are unexpectedly unsatisfied. Reasons for such inclination are that first, the curricula containing uninteresting or exact same contents make students easily get disinterested, second, the agenda for all classes involves a presentation, short group activities, reflection, and feedback surveys, which are all forced to be done as tasks, leaving extra burden on students, and third, the sessions were held during the exams periods; the schedule is making students get stressed.

The differences between educational systems from international schools and other Korean public and private schools were well acknowledged, but high levels of students' dissatisfaction were in common, so the conducted survey had to include an inclusive question for all respondents that asked about their specific needs reflecting on the current flaws of mental health education programs their schools have provided.

Students' demands for the school-provided mental health programs

The last question of the survey, in which 23 people have answered, asked the respondents' demands for the improvements that can be made for the mental health programs, and the responses mainly included educating about appropriate methods to relieve stress (73.9%), suicide prevention (17.4%), and proper civic perceptions of psychiatry clinics (30.4%). 54.2% of them selected ineffective programs (mundane contents) as the disadvantage of mental health programs provided by their schools. The significance of psychological support can be rationalized by a study result, which has shown that 46% of students in secondary schools failed academically due to their psychiatric disorders (Stephan, Weist, Kataoka, Adelsheim, and Mills 2007, 1334).

Others suggested better “systematic” agenda to be constructed, which was interpreted as more engaging content of the programs' curricula. This interpretation can be explained by the trend in which a number of respondents claimed systematic enhancements.

The study also revealed that institutions' resourcing such as employing, training, and supporting the staff might also be an impactful element to consider. Another study made an assertion to make sure that all the stakeholders—“parents, teachers, students, student service providers, and primary care health providers (Wei and Kutcher 2012, 23)”—are wholly involved in the process of developing a mental health program within schools.

Referring to all of the study results and analyses which are done above, parts to focus on for the new mental health program models will be generally educating contents that students want, scheduled before or after exam periods, and including activities that can better entice students to feel interested in the topics introduced.

Conclusion

Summary and discussion

This study intends to examine the efficiency of currently existing psychiatric care systems in high schools located in South Korea, including public schools, private schools, and international schools. Regardless of different types and/or services that are provided by their schools, students were not adequately satisfied with them. Therefore, based on the collected data, the developed version of mental health programs will edit the curricula to include contents that are more appealing to the students, schedule the sessions on dates that are not overlapping with exam periods, and add activities that can better entice students to focus on each session's topic.

A weakness found in the study is the small number of respondents who responded to the survey. Fifty-nine people were not enough to represent the eventual inclination of all Korean high school students about their thoughts regarding school-based mental health programs. Although the number of the sample was insufficient to represent the entire group of the high school students in Korea, their responses were collected and reflected on to construct a clearer guideline, which now includes more specific and rightly oriented agenda, from the aspects of being timely, effective, and engaging.

Since only 5.1% of the sample were international school students, the survey also lacks a variety of respondents. This problem can be solved by increasing the proportion of international schools students when designing the survey for a future study, and such solution can also increase the number of total respondents. Future research should include more participants with an increased ratio of international or foreign school students to interpret the numerical data with better certainty.

Implications for Korean students' overall mental health care

Health care is a topic to be seriously considered among the general public since medical welfare is a major factor which hugely affects the well-being of people. Especially in an environment exposed to strong 'education fever', students are likely to be stressed out and experience burn-outs, thus the issue of mental health must be contemplated seriously. One of the greatest merits for enhancing the quality of psychiatric support for high school students is that their stress and/or anxiety levels can be much lowered; a student who responded to the pre-interview said that she would feel much relieved despite the burden of studying and preparing for college admissions throughout her senior year if the school provided qualified psychiatric services and counseling system. This study can have its result applied to Korean education at the moment, since this paper communicates the issue of students' dissatisfaction about the mental health care services their schools are providing. Problems suggested at the beginning of the paper, such as irrelevant and ineffectively planned curricula of the programs, negative consequences of uni-directional lectures about mental health, and inadequate schedules for the educational sessions, must be mitigated as their significance is directly related to students' performance in schools (Stephan, Weist, Kataoka, Adelsheim, and Mills 2007, 1335). Students' demands must be fulfilled to enhance the teenagers' mental health overall.

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